U.S. APPL. NO. 10/526727	INTERNATION/	AL APPL.	EP203/009290
APPLICATION FILED BY: 20 MOS.,			•
			PCT International Div
INTERNATIONAL APPLICATION	PAPERS IN THE	APPLICATIO	N FILE:
✓ International application	•	A09 annexes to	DER .
Article 19 amendments		Z PCT/ISA/210	(Search report)
Priority Document(s) No	<del></del>	_ Search report	
Request Form PCT/RO/101 PCT/IB/302		_ Other Papers f	ilea
PCT/IB/304	•	WIPO PU	BLICATION
PCT/IB/306	PU	BLICATION N	0. WO 2091621,780
PCT/IB/308		BLICATION D	1 <del>-11-1-1</del>
PCT/IB/331	PU	BLICATION L	
OTHER PCT/IB/ PCT/IPEA/409 also 416		NOT PUB.	LISHED Requested
PC1/IFEA/409 also 410		O.S. Only	Requested
			•
National application basic fee paid Express Processing Requested Translation of the International Application Used the IB copy of the IA Descriptory Claims Drawings Foreign Language in drawing Article 19 Amendments Amendment used in application Article 34 Amendment Amendment used in application DNA 1194 transaction done	Assignation Substite Small F  Oath/D  N  Power of Change	ment Forward to Assignate Specification Intity Statement The Specification Intity Statement The Stat	gnment Branch
35 USC Receipt of Request (PTC Date Acceptable oath/declaration	<u> 7 – 1399 Transmit</u>	tal Letter) (	531110405
	10001100	- John Marie Contraction of the	
02(e) Date Date complete 35 USC 371 requi	rements met		
nAT	E NOTICE COM	PLETED	/
OO/EO 903 Notice of Accepta		3/10/	B. IN
OO/EO 905 Notice of Missing		1	120100
OO/EO 917 Notice of A defect	tive oath or declar	ation	
OO/BO 916 Notice of defective			
OO/EO 913 Notice of defective			
OO/EO 909 Notification of A			

REQUEST FOR PATENT FEE REFUND								
1 Date of Request:	al/Patent ## 526727							
3 Please refund the following fee(s):		4 PAF	ER IBER	5 DATE FILED	6 AMOUNT			
Filing					\$			
Amendment			-	-	\$			
Extension of Time			·		\$			
Notice of Appeal/Appeal					\$			
Petition					\$			
Issue					\$			
Cert of Correction/Terminal Disc.		,			\$			
Maintenance					\$			
Assignment					\$			
Other				•	\$			
		7 TOTAL AMOUNT OF REFUND \$		\$				
		8 TO	BE R	EFUNDED B	Y:			
10 REASON:		Treasury Check						
Overpayment		Credit Deposit A/C #:						
Duplicate Payment		9						
No Fee Due (Explanation):								
11 REFUND REQUESTED BY:								
TYPED/PRINTED NAME:			— T	TLE: Rin. Kef: 07/21/	2005 PKIDWELL 002032080 Kumber:10526727			
SIGNATURE:			Pi	IONE:	Number:10526727 *258.00 CK			
OFFICE: ************************************								
APPROVED:		DATE	: <u>.</u>	7,				

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B